

## UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

## FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROV	AL 🤄									
OMB Number 3235-0076										
Expires: May 31, 2005										
Estimated average burden										
hours per response 1.00										
SEC USE ONLY										
SEC U	SE ONLY									
SEC U Prefix	SE ONLY Serial									
Prefix										
Prefix	Serial									

Name of Offering (()) (check if this is an amendment and name has changed, and indicate change)									
Performance Metrics, LLC 10% Senior Secured Convertible	e Promissory Notes, at	tached Warrants	and Membership Units	issuable upon					
exercise of the Warrants.			•	•					
Filing Under (Check box(es) that apply):   Rule 504	Rule 505	X Rule 506	Section 4(6)	ULOE					
Type of Filing: New Filing									
A. BASIC	IDENTIFICATION	DATA		-1256					
Enter the information requested about the issuer									
Name of Issuer (check if this is an amendment and r	name has changed, and	l indicate change	e.)						
Performance Metrics, LLC				•					
Address of Executive Offices (Number and S	treet, City, State, Zip (	Code) Tel	lephone Number (Includ	ing Area Code)					
143 Sound Beach Avenue, Old Greenwich, Connecticut 068	370	(20	03) 698-7800	0					
	treet, City, State, Zip (	Code) Tel	lephone Number (Includ	ing Area Code)					
(If different from Executive Offices)				EIVED (C)					
Brief Description of Business	·								
•		2000	ESSED JUL 2	2 2004					
		PROC	EDOFF JOE @	2 2004 >>					
developing and marketing database models and analytical to	ools for business soluti	ons	מחחו	fig.					
		JUL 2'	7 ZUU4	U.S. 1887					
The CD is the CD		700	\$	327					
Type of Business Organization		HON FINAL	ASON NCIAL	1 / / 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1					
corporation limited partnership,	-	X officer (	prease specify): limit	ed liability company					
business trust limited partnership,		Year	<u> </u>	*					
Actual or Estimated Date of Incorporation or Organization:	Month	03	X Actual	□ Estimated					
	tter U.S. Postal Service		•	Estimated					
Invindiction of Incompration or Organization:	la; FN for other foreign		or State:	CT					
- CN 101 Callac		ii jui isuiction)							
GENERAL INSTRUCTIONS									
Federal:			,						
Who Must File: All issuers making an offering of securities in rela	iance on an exemption	under Regulation	on D or Section 4(6), 17	CFR 230.501 et seq.					
or 15 U.S.C. 77d(6).				4					
When To File: A notice must be filed no later than 15 days after the									
Securities and Exchange Commission (SEC) on the earlier of the				eceived at that					
address after the date on which it is due, on the date it was mailed	-								
Where to File: U.S. Securities and Exchange Commission, 450 Fi		•							
Copies Required: Five (5) copies of this notice must be filed with		h must be manua	ally signed. Any copies a	not manually signed					
must be photocopies of the manually signed copy or bear typed or	-								
Information Required: A new filing must contain all information									
changes thereto, the information requested in Part C, and any mate	erial changes from the	information prev	viously supplied in Parts	A and B. Part E					
and the Appendix need not be filed with the SEC.									
Filing Fee: There is no federal filing fee.									
State: This notice shall be used to indicate reliance on the Unifor									
have adopted ULOE and that have adopted this form. Issuers rely									
state where sales are to be, or have been made. If a state requires									
proper amount shall accompany this form. This notice shall be fil	ed in the appropriate s	tates in accordan	ice with state law. The A	Appendix to the					
notice constitutes a part of this notice and must be completed.									
	ATTENTION								
Failure to file notice in the appropriate states will not re	Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the								
appropriate federal notice will not result in a loss of an a									
filing of a federal notice.									

Potential persons who are to respond to the collection of information contained in this form are not required

to respond unless the form displays a currently valid OMB control number.

SEC 1972 (6/02)

## Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: X Promoter X Beneficial Owner Executive Officer General and/or Director Managing Partner (LLC) Full Name (Last name first, if individual) Totonis, Harry Business or Residence Address (Number and Street, City, State, Zip Code) 143 Sound Beach Avenue, Old Greenwich, Connecticut 06870 Check Box(es) that Apply: X Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Smith, Winston Business or Residence Address (Number and Street, City, State, Zip Code) c/o WHS Holdings, LLC, 6 Benedict Place, Greenwich, CT 06830 Check Box(es) that Apply: Promoter X Beneficial Owner Executive Officer Director General and/or (Ex Com) Managing Partner Full Name (Last name first, if individual) 20 Greenhill, Raymond Business or Residence Address (Number and Street, City, State, Zip Code) 1358 Perth Road, Hagaman, NY 12086 Check Box(es) that Apply: Promoter X Beneficial Owner X Executive Officer General and/or ☐ Director Managing Partner Full Name (Last name first, if individual) D'Acierno, Leo Business or Residence Address (Number and Street, City, State, Zip Code) 143 Sound Beach Avenue, Old Greenwich, Connecticut 06870 Executive Officer General and/or Check Box(es) that Apply: Promoter Beneficial Owner Director Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Executive Officer Check Box(es) that Apply: Promoter Beneficial Owner Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) (Use blank sheet, or copy and use additional copies of this sheet, as necessary) 2 of 8

A. BASIC IDENTIFICATION DATA

Enter the information requested for the following:

1	Hac t	he issu	er co	ld or d	loes i	he iccu	er intend	to se	ill to	non	-accr	edited	invo	etore ir	thic	offeri	na?						Yes	No X
Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?  Answer also in Appendix, Column 2, if filing under ULOE											•		. <b>A</b>											
2. What is the minimum investment that will be accepted from any individual?											. \$		- 0 -											
													Yes	. No										
<ul><li>3. Does the offering permit joint ownership of a single unit?</li><li>4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission.</li></ul>												X												
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name													1											
																								a't
							n five (5) r or deale			io de	nsie	u are as	soci	ated pe	ersor	is or su	cn a	broker	or a	еатег, у	ou m	iay set		
Full Name (Last name first, if individual)																								
D	ublin	d Secur	ities	Inc.																				
Busines	s or R	esiden	e Ac	dress	(Nun	nber an	d Street,	City.	Stat	e, Zi	р Со	de)												
C	ne So	und Sh	ore I	Orive, (	Greer	nwich,	Connecti	cut 0	6830	)														
Name o	f Asso	ociated	Brok	er or I	Deale	r												7.						
																								r F •
States in	-Whi	ch Pers	on L	isted F	Ias S	olicited	or Inten	ds to	Soli	cit Pu	ırcha	isers		-	-								ţ	Į.
(Check	"All S	States"	or ch	eck ind	divid	ual Stat	tes)			• • • • • • • • • • • • • • • • • • • •			•••••					•••••					All	States
[AL		[AK]		[AZ]		[AR]	X [CA	.] >	[0	CO]	X	[CT]		[DE]	X	[DC]		[FL]		[GA]		[HI]		[ID]
X [IL]		[IN]	X	[IA]		[KS]	☐ [KY	7) [	] []	LA]		[ME]	X	[MD]	X	[MA]		[MI]		[MN]		[MS]		[MO]
	] 🗆	[NE]		[NV]		[NH]	□ [NJ	] [	<b>]</b> [	NM]	x	[NY]		[NC]		[ND]		[OH]		[OK]		[OR]	x	[PA]
X [RI]		[SC]		[SD]		[TN]	[T]	[] [	ן כ	UT]		[VT]		[VA]		[WA]		[WV]		[WI]		[WY]		[PR]
Full Na	me (L	ast nan	ne fir	st, if ir	ndivid	dual)																		2-
Busines	s or R	esiden	e Ac	ldress	(Nun	nber an	d Street,	City,	Stat	e, Zi	р Со	de)												
Name o	f Asso	ociated	Brok	er or I	Deale	r		-								-								
States in	1 Whi	ch Pers	on L	isted H	Ias S	olicited	or Inten	ds to	Soli	cit Pu	ırcha	sers												
(Check	"All S	States"	or ch	eck ind	divid	ual Stat	tes)	•••••					•••••				••••••	•••••	•••••				All	States
☐ [AL]		[AK]		[AZ]		[AR]	☐ [CA	·] [	] [	CO]		[CT]		[DE]		[DC]		[FL]		[GA]		[HI]		[ID]
[IL]		[IN]		[IA]		[KS]		"] [	<b>]</b> [1	LA]		[ME]		[MD]		[MA]		[MI]		[MN]		[MS]		[MO]
☐ [MT	] 🔲	[NE]		[NV]		[NH]	□ [NJ	] [	] [	NM]		[NY]		[NC]		[ND]		[OH]		[OK]		[OR]		[PA]
☐ [RI]		[SC]		[SD]		[TN]	(T)	[]	_ [1	UT]		[VT]		[VA]		[WA]		[WV]		[WI]		[WY]		[PR]
Full Na	me (L	ast nan	ne fir	st, if in	divid	dual)																		0.5
																								٠
Busines	s or R	esiden	ce Ac	ldress	(Nun	nber an	d Street,	City	Stat	e, Zi	р Со	de)												*
Name o	f Asso	ciated	Brok	er or I	Deale	r										··.								
States in	n Whi	ch Pers	on L	isted F	Ias S	olicited	or Inten	ds to	Soli	cit Pu	ırcha	sers								-			<del></del>	
(Check	"All S	States"	or ch	eck inc	divid	ual Stat	tes)		•••••	• • • • • • • • • • • • • • • • • • • •			•••••						•••••				All	States
☐ [AL		[AK]		[AZ]		[AR]	☐ [CA	·] [	] [	CO]		[CT]		[DE]		[DC]		[FL]		[GA]		[HI]		[ID]
□ [IL]		[IN]		[lA]		[KS]	☐ [K	() [	] [	LA}		[ME]		[MD]		[MA]		[MI]		[MN]		[MS]		[MO]
☐ [MT	] 🗆	[NE]		[NV]		[NH]	□ [N]	] [	] [	NM]		[NY]		[NC]		[ND]		[OH]		[OK]		[OR]		[PA]
☐ [RI]		[SC]		{SD}		[TN]	☐ [TX	[]	] [	UT]		[VT]		[VA]		[WA]		[WV]		[WI]		[WY]		[PR]

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold.  Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		<b>A</b>		,
	Type of Security		Aggregate ffering Price	Α	Amount lready Sold
	Debt	\$	1,000,000	\$_	112,500
	Equity	\$	- 0 -	\$	- 0 -
	Common Preferred				
	Convertible Securities (including warrants)	\$_	-0-	\$_	- 0 -
	Partnership Interests	\$_	-0 -	\$	- 0 -
	Other (Specify: Warrants)	\$	1,000,000	\$	- 0 -
	Total	\$	2.000.000		112,500
	Answer also in Appendix, Column 3, if filing under ULOE.	-		-	
2.	Enter the number of accredited *and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				Aggregate
	the total lines. Eller of hallower is findle of Lero.		Number Investors	Do	llar Amount Purchases
	Accredited Investors		- 0 -	\$_	- 0 -
	Non-Accredited Investors	_	- 0 -	<b>\$</b> _	- 0 -
	Total (for filings under Rule 504 only)			\$	
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		T. C		v. v.
	Type of Offering		Type of Security	Do	llar Amount Sold
	Rule 505			\$_	
	Regulation A			\$_	
	Rule 504			\$_	
	Total			\$_	
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees	• • • • • • • • • • • • • • • • • • • •		\$	-0-
	Printing and Engraving Costs			\$	-0-
	Legal Fees	•••••	X	\$	25,000
	Accounting Fees	•••••		s _	-0-
	Engineering Fees			s _	-0-
	Sales Commissions (specify finders' fees separately)			\$	-0-
	Other Expenses (identify) filing fees		X	<b>s</b>	1,535
	m . 1			_	

	Question 1 and total expenses furnished	ate offering price given in response to Part C – in response to Part C - Question 4.a. This ds to the issuer."	·····		 		4	\$1,973,465						
5.	used for each of the purposes shown. If the estimate and check the box to the left of the	ross proceeds to the issuer used or proposed to b amount for any purpose is not known, furnish an estimate. The total of the payments listed must er set forth in response to Part C - Question 4.b												
	above.			O Dir	yment to  fficers,  ectors, &  ffiliates			ments to Others						
	Salaries and fees		X	\$_	175,000	X	_	482,395						
	Purchase of real estate			\$_	-0-		\$_	-0-						
	Purchase, rental or leasing and installation of	f machinery and equipment		\$_	-0-	X	\$_	25,000						
	Construction or leasing of plant buildings ar	nd facilities		\$_	-0-		\$_	-0-						
	that may be used in exchange for the assets	ne value of securities involved in this offering or securities of another issuer pursuant to a		\$	-0-		\$	-0-						
	• ,	Tants)	_	_	-0-	X	_	1,000,000						
	• •				-0-	X	· -	291,070						
	Other (specify)			\$_			` -							
				\$_	-0-		\$_	-0-						
	Column Totals		X	\$_	175,000	X	\$_	1,798,465						
	Total Payments Listed (column totals added	)	X \$ 1,973,465											
		D. FÖDERALSIGNATURE												
sigr	ature constitutes an undertaking by the issuer	d by the undersigned duly authorized person. If to furnish to the U.S. Securities and Exchange (coredited investor pursuant to paragraph (b)(2) of	Comm	issio										
Issu	er (Print or Type)	Signature	Þ	ate										
Per	Formance Metrics, LLC		Jı	ıly 21	1, 2004									
Nar	ne of Signer (Print or Type)	Title of Signer (Print or Type)						· · ·						
Har	ry Totonis	Manager						-						
								7 4.5 2.2						
								W						
	<u></u>													

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

ATTENTION

'utentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)